

Income Contingent Repayment Plan Alternative Documentation of Income

OMB No. 1845-0016 Form Approved Exp. Date 12/31/2002

William D. Ford Federal Direct Loan Program

Federal Direct Stafford/Ford Loans, Federal Direct Unsubsidized Stafford/Ford Loans,

Federal Direct Subsidized Consolidation Loans, Federal Direct Unsubsidized Consolidation Loans **WARNING**: Any person who knowingly makes a false statement or misrepresentation on this form shall be subject to penalties which may include fines, imprisonment, or both, under the U.S. Criminal Code and 20 U.S.C. 1097.

Instructions

YOU ARE REQUIRED to complete this form if you are repaying your Direct Loans under the Income Contingent Repayment (ICR) Plan and:

- you are in your first year of repayment on a Direct Loan;
- you are in your second year of repayment on a Direct Loan and have been notified that alternative documentation of your income is required; or
- you have been notified that the Internal Revenue Service (IRS) is unable to provide the Department of Education with your Adjusted Gross Income (AGI) or that of your spouse.

YOU MAY complete this form if you are repaying your Direct Loans under ICR and your AGI, as reported on your most recently filed federal tax return, or that of your spouse does not reasonably reflect your current income. Your AGI may not reflect your current income and ability to repay your loan(s) in circumstances such as loss or change of employment by you or your spouse.

In cases where alternative documentation of your income is used, the amount of your monthly payment under ICR is based on the current income information you and your spouse provide and is reevaluated annually. To submit alternative documentation of your income, you must attach the required documentation, complete and sign this form, and return it to the address on the back of this form. If you are married, your spouse also must complete and sign the applicable sections of this form and submit the required documentation. If you need assistance, please call 1-800-557-7392, or TDD 1-800-557-7395.

Section 1: Iden	tifying Information (Bo	orrower and Spouse, if married)			
Your Name		Your Spouse's	Your Spouse's Name		
Your Social Secur	ity Number	Your Spouse's	Your Spouse's Social Security Number		
Section 2: Inco	me Information (Borro	ower and Spouse, if married)			
You must list all ta Include the amoun employed. If you a must have support signed statement of documentation must have support signed statement documentation must have support signed statement documentation must have support signed statement documentation must have support signed statement documentation must have support signed statement documentation must have support signed signed statement signed statement signed	exable income you are current of money received, how or are married, your spouse's ting documentation (i.e., particularly your income sout that not be more than 90 days.	ently receiving (i.e., income from employment, upoften you receive this money, and your employe income and documentation of this income also ay stubs, dividend statements, canceled checks, urce(s) and giving the addresses of these source your sold. Do not report untaxed income such as Ses significantly after your submission of this form	r (if any must be or, whe es) subn ocial Se	or the source of your income if you are not provided. All income reported under this section these forms of documentation are unavailable, a nitted with this application. All supporting	
	Amount	Frequency of Pay (weekly, bi-weekly, monthly, yearly, o	ther)	Employer / Source of Income	
Borrower's Income					
	Check here if you d	o not have any taxable income.			
Spouse's					
Income					
· 🗖		o not have any taxable income. ocumentation of your income, you must provide Not required to file a federal income		· 🖒	
Section 3: Cert	ification and Signature	e (Borrower and Spouse, if married)			
Certification: I ce knowledge. I agre documentation of information, the De allowed to repay m	ertify that all of the informat se to provide to the Departr my income for the purpose epartment will base my inco	ion reported to qualify for alternative documenta nent of Education (the Department) on an annua of determining my appropriate repayment amou ome contingent repayment amount on my AGI, a	al basis unt unde as repor	(or as required by the Department) alternative	
Borrower's Signati	ure		[Date	
Spouse's Signatur	re		-	Date	

Return this form to:

U.S. Department of Education Consolidation Department Loan Consolidation Center P.O. Box 242800 Louisville, KY 40224-2800

If you need assistance in completing this form, call 1-800-557-7392. Individuals who use a telecommunications device for the deaf (TDD) may call 1-800-557-7395.

Privacy Act Disclosure Notice

The Privacy Act of 1974 (5 U.S.C. 552a) requires that we disclose to you the following information:

The authority for collecting this information is §451 et seq. of the Higher Education Act of 1965, as amended (the HEA) (20 U.S.C. §1087a et seq.). The principal purpose for collecting this information is to allow you to provide documentation of your current income to the Department of Education (the Department) so that an appropriate monthly repayment amount may be calculated under the Income Contingent Repayment Plan.

We ask that you and your spouse, if married, provide the information requested on this Alternative Documentation of Income form on a voluntary basis. However, if either you or your spouse does not provide all of the requested information that is available to you to the Department, your monthly payment amount may be based on your Adjusted Gross Income, as reported by the Internal Revenue Service, or, in some cases, you may not be allowed to repay your Direct Loan(s) under the Income Contingent Repayment Plan.

The information in your file may be disclosed to third parties as authorized under routine uses in the Privacy Act notices called "Title IV Program Files" (originally published on April 12, 1994, Federal Register, Vol. 59, p. 17351) and "National Student Loan Data System" (originally published on December 20, 1994, Federal Register, Vol. 59, p. 65532). Thus, this information may be disclosed to parties that we authorize to assist us in administering the Federal student aid programs, including contractors that are required to maintain safeguards under the Privacy Act. Disclosures may also be made for verification of information, determination of eligibility, enforcement of conditions of the loan or grant, debt collection, and the prevention of fraud, waste, and abuse and these disclosures may be made through computer matching programs with other Federal agencies. Disclosures may be made to determine the feasibility of entering into computer matching agreements. We may send information to members of Congress if you ask them in writing to help you with Federal student aid questions. If we are involved in litigation, we may send information to the Department of Justice (DOJ), a court, adjudicative body, counsel, or witness if the disclosure is related to financial aid and certain other conditions are met. If this information, either alone or with other information, indicates a potential violation of law, we may send it to the appropriate authority for consideration of action and we may disclose to DOJ to get its advice related to the Title IV, HEA programs or questions under the Freedom of Information Act. Disclosures may be made to qualified researchers under Privacy Act safeguards. In some circumstances involving employment decisions, grievances, or complaints or involving decisions regarding the letting of a contract or making of a grant, license, or other benefit, we may send information to an appropriate authority. In limited circumstances, we may disclose to a Federal labor organization recognized under 5 U.S

Because we request your social security number (SSN), we must inform you that we collect your SSN on a voluntary basis, but section 484(a)(4) of the HEA (20 U.S.C. 1091(a)(4)) provides that, in order to receive any grant, loan, or work assistance under Title IV of the HEA, a student must provide his or her SSN. Your SSN is used to verify your identity, and as an account number (identifier) throughout the life of your loan(s) so that data may be recorded accurately.

Paperwork Reduction Notice

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number. The valid OMB control number for this information collection is 1845-0016. The time required to complete this information collection is estimated to average 0.33 hours (20 minutes) per response, including the time to review instructions, search existing data resources, gather and maintain the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, DC 20202-4651. If you have any comments or concerns regarding the status of your individual submission of this form, write directly to:

U.S. Department of Education Consolidation Department Loan Consolidation Center P.O. Box 242800 Louisville, KY 40224-2800